

**GSA SmartPay2 – Department of the Interior – Restrictive Fleet Account Form**

To ensure accurate and timely processing please type or print clearly. Incomplete, illegible forms will not be processed.

<b>Agency Information Required</b>																															
Agency/Organization Name: United States Department of the Interior																															
Company #		700				(5 digits total)				Bank 8226				Plastic Type <input checked="" type="checkbox"/> Standard (Agent 0101)																	
Hierarchy Level:		Level 1 00003				PaymentNet Hierarchy ID														Tax Exempt Field											
<b>Cardholder Information Required</b>																															
Vehicle Name (First Name, Asterisk, Last Name)																															
Unique Security Identifier (Required)		<div style="display: flex; justify-content: space-between;"> <span>---</span> <span>---</span> </div>																													
Unique Passphrase (FIPS#) (Required)																															
Name Line 2		TAX EXEMPT ID 140001849																													
Address Line 1																															
Address Line 2																															
City		<div style="display: flex; justify-content: space-between;"> <span>State</span> <span>Zip Code</span> </div>																													
Telephone Numbers: (Including applicable Area Codes):										Work Phone (    )    -										FAX Number (    )    -											
Master Accounting Code		Segment 1				Segment 2				Segment 3				Segment 4				Segment 5				Segment 6									
		Blank																													
Vehicle Custodian Signature: _____														Date: _____																	
Supervisor/Fleet Manager Name and signature: _____ Name (Please Type or print)														Supervisor/Fleet Manager Signature _____ Date: _____																	
<b>Fleet Card Controls</b>																															
Product Restriction Code: Bank Use Only: 1				Product Type Code: 5				Emboss "Fuel Only": Bank Use Only: N				Vehicle or Driver Card: V				Authorize: Bank Use Only: N															
<b>Cardholder Controls – to be completed by A/OPC</b>																															
																								Credit Limit \$				(Same as Cycle Limit)			
MCC Group 1		F D O I F L E E T R										MCCG1 Action Code: I				MCC Group 1 Cycle Limit \$				MCC Group 1 Single Purchase Limit \$											
MCC Group 2		F D O I F L E T R D										MCCG1 Action Code: D																			
If Action=Divert, Diversion Account #										5	5	6	8	---	2	6	7	9	--	0	0	0	0	---							
<b>Approval Required – A/OPC</b>																															
Approved By: _____ Name (Please Type or Print)														A/OPC Signature: _____										Date: _____							
Address Line 1														Address Line 2																	
City:				State:				Zip Code:				Phone:				Fax:				Email:											
<small>Forms may be sent by facsimile transmission to JPMC without hard copy follow up provided, however, that JPMC shall be entitled to rely on any unconfirmed, facsimile transmission made by any person or persons JPMC reasonably believes to be acting on behalf of the Corporation as if such notice had been confirmed and the Corporation hereby indemnifies and holds JPMC harmless from any loss, cost or expense, including reasonable attorney's fees, which JPMC may incur or become liable for as a result of such reliance.</small>																															
<b>Bank Use Only</b>																															
Account Number _____ - _____ - _____																															
Date: _____														Initials: _____																	

Forward completed application to Fax 888-297-0785

## FLEET APPLICATION INSTRUCTIONS

**Purpose:** The U. S. Department of the Interior will use this form to establish a fleet account for the GSA SmartPay2 program.

**Instructions: Cardholders:** Cardholder is generally the Vehicle Custodian. Fill out the section entitled "Cardholder Information Required." Please print or type all information except your signature.

**Supervisor/Fleet Manager:** After reviewing the information provided by the Vehicle Custodian, complete the Supervisor/Fleet Manager's section at the bottom of "Cardholder Information Required." Please print or type all information except your signature.

**A/OPCs:** Fill out the sections entitled "Agency Information Required", "Cardholder Controls", and "Approval Required—A/OPC" Please print or type all information except your signature.

### Agency Information Required

**Company Number** – Choose the appropriate bureau company code listed below:

<u>BUREAU</u>	<u>COMPANY NUMBER</u>
Office of the Secretary	70000
Bureau of Land Management	70001
Bureau of Indian Affairs	70002
Bureau of Reclamation	70003
Bureau of Reclamation Job Corps	70004
US Geological Survey	70005
National Park Service	70006
US Fish and Wildlife Service	70007
Office of Surface Mining	70008
Minerals Management Service	70009
AQD – Herndon	70010
Office of Special Trustee	70011
Office of Inspector General	70012

**PaymentNet ID** – Refer to Bureau Hierarchy Listing. Report available to download in PaymentNet, Report entitled, "Hierarchy List by Level." List only the single hierarchy node at which the card will reside.

**Tax Exempt Field** – – Choose the appropriate bureau code listed below:

<u>BUREAU</u>	<u>TAX EXEMPT STATUS CODE</u>
Office of the Secretary	119
Bureau of Land Management	109
Bureau of Indian Affairs	108
Bureau of Reclamation	110
Bureau of Reclamation Job Corps	110
US Geological Survey	116
National Park Service	115
US Fish and Wildlife Service	111
Office of Surface Mining	114
Minerals Management Service	112
AQD – Herndon	119
Office of Special Trustee	117
Office of Inspector General	136

## Vehicle Information Required

**Vehicle Name** – First Name shall always be the Bureau acronym. The Last Name shall be the Tag number for all DOI owned vehicles. If card is for miscellaneous equipment, follow bureau-specific format instructions. See sample below:

Field length available: 25 characters.

Bureau	Vehicle		Equipment	
	First Name	Last Name	First Name	Last Name
BIA	BIA	I123456	BIAEQ	XXXXXX
	BIAF	I123456	BIAMISC	XXXXXX
BLM	BLM	I123456		
	BLMF	I123456		
BOR	BOR	I123456	BORMISC	XXXXXX
FWS	FWS	I123456		
	FWSF	I123456	FWSMISC	XXXXXX
MMS	MMS	I123456		
NPS	NPS	I123456		
	NPSF	I123456	NPSMISC	XXXXXX
OS	OS	I123456	OSMISC	XXXXXX
OSM	OSM	I123456	OSM	MISCXXXXXX
OST	OST	I123456	OSTMISC	XXXXXX
USGS	USGS	I123456	USGS	MISC012345

**Unique Security Identifier** – This is a required field for JPMorgan Chase and cannot contain alpha characters. The first digit is 9 to indicate Fleet Card. The next two digits are the Departmental bureau Code. The Last Six Digits will be the vehicle tag number or serial number assigned to the vehicle or equipment. See below for bureau-specific information.

- Vehicles – Use the unique identifier prefix below for vehicles for each bureau followed by the I-Tag numbers only (eliminating the "I"). If the number is less than six digits, then add zeroes to the front of the number to make 6 digits.
- Equipment - Use the unique identifier prefix below for equipment for each bureau followed by the serial number or property number for piece of equipment. If the number is less than six digits, then add zeroes to the front of the number to make 6 digits.

Bureau	Unique ID Format		Vehicle			Equipment		
	Vehicle	Equip	First Name	Last Name	Unique ID	First Name	Last Name	Unique ID
BIA	945#####	955#####	BIA	I123456		BIAEQ	12345	955012345
			BIAF	I123456	945123456	BIAMISC	001234	955001234
BLM	942#####	952#####	BLM or					
			BLMF	I123456	942123456			
BOR	947#####	957#####	BOR	I123456	947123456	BOR	12345	957012345
FWS	948#####	958#####	FWS or					
			FWSF	I123456	948123456	FWS	12345	958012345
MMS	944#####	954#####	MMS	I123456	944123456	MMS	12345	954012345
NPS	941#####	951#####	NPS or	I123456	941123456			
			NPSF	I123456	941123456	NPS	12345	951012345
OS	940#####	950#####	OS	I123456	940123456	OS	12345	950012345
OSM	946#####	956#####	OSM	I123456	946123456	OSM	12345	956012345
OST	949#####	959#####	OST	I123456	949123456	OST	12345	959012345
USGS	943#####	953#####	USGS	I123456	943123456	USGS	MISC001234	953001234

**Unique Passphrase (FIPS)** – See bureau specific list below:

**BUREAU** **FIPS CODE**

Office of the Secretary	1406
Bureau of Land Management	1422
Bureau of Indian Affairs	1450
Bureau of Reclamation	1425
Bureau of Reclamation Job Corps	1425
US Geological Survey	1434
National Park Service	1443
US Fish and Wildlife Service	1448
Office of Surface Mining	1438
Minerals Management Service	1435
AQD – Herndon	1406
Office of Special Trustee	1408
Office of Inspector General	1404

**Name Line 2: TAX EXEMPT ID 140001849** – Standard for most DOI accounts

**Primary Mailing Address** – This is the address to which the vehicle/equipment statement of account should be mailed. In general, a physical address is required on any “Code Red” or rush application.

- **Address Line 1:** Use the name or title of the Fleet Manager or vehicle/equipment custodian. When using the specific name, use the format: **CO John Doe**. Remember to update this name in PaymentNet when staff changes occur. [Field length available: 35 positions. Data Type: Alphanumeric.]
- **Address Line 2:** Indicate the street or other address information. [Field length available: 35 positions. Data Type: Alphanumeric.]
- **City:** Self-explanatory. [Field length available: 23 positions. Data Type: Alphabetic.]
- **State:** Self-explanatory. [Field length available: 2 positions. Data Type: Alphabetic.]
- **Zip Code:** Self-explanatory. [Field length available: 5 positions. Data Type: Numeric.]

**Telephone Numbers (including applicable Area Codes)** –

- **Work Phone:** The applicant’s commercially accessible work telephone number. [Field length available: 17 positions. Data Type: Numeric.]
- **Fax Number:** The applicant’s commercially accessible fax number, if available. [Field length available: 17 positions. Data Type: Numeric.]

**Master Accounting Code** - MAC or Default Account Code – The default account code that will be applied to all transactions for this account for budget tracking purposes. This is a mandatory field for non-FBMS bureaus. Complete segments in accordance with bureau format below. Note: FBMS bureaus should leave this section blank.

Bureau/Accounting Entity	Format Example*					
	SEG 1	SEG 2	SEG 3	SEG 4	SEG 5	SEG 6
Bureau of Indian Affairs (BIA)	Blank	2009-A00100-31010	A0001000	261A	N/A	N/A
Bureau of Land Management (BLM)	Blank	N/A	N/A	N/A	N/A	N/A
Bureau of Reclamation (BOR)	Blank	K12-12345678-1234567	1234567	#####	261A	N/A
Fish and Wildlife Service (FWS)	Blank	2009-12610000	12345	665K	261A	N/A
Minerals Management Service (MMS)	Blank	N/A	N/A	N/A	N/A	N/A
AQD - Herndon	Blank	5G2500RCC	261A	N/A	N/A	N/A
Office of the Secretary	Blank	2009	6600	CBW01-#####	CZ	261A
Office of Surface Mining	Blank	N/A	N/A	N/A	N/A	N/A
National Park Service	Blank	200914920002SYA	261A	N/A	N/A	N/A
US Geological Survey	Blank	2009-2010	6120-00060	261A	N/A	N/A
Office of the Special Trustee	Blank	2009-70000000	9999	261A	N/A	N/A
BOR Job Corps	Blank	2009-08P-503521	6701	261A	N/A	N/A

**Vehicle Custodian Signature and Date** – Employee's (Vehicle Custodian's) signature and the date the application form is signed.

**Supervisor/Fleet Manager Approval Signature and Date** – Employee's supervisor or the Fleet Manager must sign and date the setup/application form.

**Fleet Controls (Section to be completed by the Agency/Organization Program Coordinator)**

**If Action=Divert, Diversion Account No.** Complete bureau primary diversion account number.

<b>BUREAU</b>	<b>LAST FOUR OF DIVERSION ACCOUNT NUMBER</b>
Office of the Secretary	####-####-####-2799
Bureau of Land Management	####-####-####-2815
Bureau of Indian Affairs	####-####-####-2849
Bureau of Reclamation	####-####-####-2880
Bureau of Reclamation Job Corps	####-####-####-2914
US Geological Survey	####-####-####-2930
National Park Service	####-####-####-2963
US Fish and Wildlife Service	####-####-####-2997
Office of Surface Mining	####-####-####-3029
Minerals Management Service	####-####-####-3045
AQD – Herndon	####-####-####-2773
Office of Special Trustee	####-####-####-3300
Office of Inspector General	####-####-####-3086

**Approval Required – A/OPC (Section to be completed by the Agency/Organization Program Coordinator)**

**A/OPC** – Printed or typed name of the Agency/Organization Program Coordinator (A/OPC) authorizing this application on behalf of their bureau or office and the Department of the Interior.

**Signature** – A/OPC's signature.

**Date** – Date of A/OPC's signature.

**Address Line 1** – The first line of the agency address should start with the bureau or office name.

**Address Line 2** – If needed, continue with the street, P.O. Box or other address information.

**City** – Self-explanatory.

**State** – Self-explanatory.

**Zip Code** – Self-explanatory.

**Phone** - Self-explanatory.

**Fax** - Self-explanatory.

**E-mail** - Self-explanatory.

**Once completed, you may FAX completed application form(s) to:**

JPMorgan Chase at **1-888-297-0785**